SIR PONNAMBALAM RAMANATHAN FACULTY OF PERFORMING AND VISUAL ARTS, UNIVERSITY OF JAFFNA
APPLICATION FORM FOR STUDENT APPEAL

1.	Name with Initials : **(IN BLOCK CAPITALS)**	Mr./Miss./Mrs.
2.	Registration No.	
3.	Registered Academic year	
4.	Current year of study	
5.	Telephone No (mobile) :	
6.	Course Name :	**Bachelor of Fine Arts………………………………**
7.	Postal Address : **(IN BLOCK CAPITALS)**	
8.	General / Special :	
9.	If Special, Field of Specialization):	
10	Request :	
11	Reason :	
12	Supporting Documents : **(please see annexure)**	1.Medical certificate issued by Govt.Hospital/Private Hospital/UMO 2.Any other relevant support documents **(please strike off which is inapplicable)**
	If a Medical Certificate is not issued by the University Medical Officer, You are requested to get the observation from the University Medical officer on the medical certificate.	
13*	Observation of the University Medical Officer	
14	Request for Examination attempts :	First / Second / Third / Final Mercy chance
15	……………… Date	…………………..................... Signature of the applicant

*Cage 13 applicable for those who appeal on medical grounds

16. Details of attendance: (**All applicants must submit the following details**)

Subject Code No. of which the candidate required to sit for exam/follow the lectures	Title	Attendance (**Must be filled by Head of Dept.**)	Signature of the Head of Department

17. Recommendation of the Head of Department

Particulars given in cage 1,2,3,4,6,8,9,10,11,12,14 & 16 are correct and recommended/not recommended his/her request.

Date: …………………..   Signature: ……………….
                                                                        (official rubber stamp)

Annexure

Documents to be submitted with Student Appeal

Reason	Medical Certificate (Original)	Exam Admission Card (Copy)	Any Other relevant support Documents
Absent for Exam on Medical grounds	√	√	x
Absent for Exam for reasons other than medical grounds	x	√	√
Absent for lectures on Medical grounds	√	x	x
Absent for lectures for reason other than Medical grounds	x	x	√

For office use

Recommendation Details	Meeting No. and Date
Faculty Board	
Senate	

Documents sent to the Admission branch on ……………………………….